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ABSTRACT

Fear of controversy, cultural taboos, and fear of homosexuality have prevented many educators from dealing effectively with gay and lesbian young people. The climate in most schools is such that gay teens rarely are willing to expose themselves to the ridicule, harassment, and abuse that comes when they openly acknowledge their sexual orientation. Instead, they hide their sexuality in order to pass for "normal." Such concealment takes a terrible psychological and emotional toll. The result can be behavioral choices that place adolescents at risk of school failure, disease, and even death. To counteract these conditions, educators will need to acknowledge that homosexuality is a variation in sexual orientation and that they have a professional responsibility to provide information, counseling, and other services. They will need to take deliberate steps to eliminate the negative attitudes and actions of students and staff in their schools that place gay teens at risk. (KM)

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FASTBACK

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Gay Teens at Risk

Donovan R. Walling

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DONOVAN R. WALLING

In July 1993, Donovan R. Walling was appointed as Editor of Special Publications for Phi Delta Kappa.

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Series Editors, Derek L. Burleson and Donovan R. Walling

Gay Teens at Risk

by
Donovan R. Walling

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The chapter sponsors this fastback in memory of John Ray, who was president of the chapter in 1974-75 and delegate for many years. His leadership in the chapter and his service to students as principal of the University High School at Indiana University and as Associate Dean of Student Services in the School of Education exemplify the ideals of Phi Delta Kappa.

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Introduction

If there is a single reason why so little is being done in this country about adolescent AIDS, it is that as a nation we are terribly afraid of the sexuality of our teens.

– Gabe Kruks, in *The Advocate*, March 1992

Many teens struggle with questions about their emerging sexual orientation, but they have little access to adequate counseling or other support services. The reluctance of educators to deal candidly with teenage sexual orientation issues, particularly if that orientation is homosexual, places a significant number of adolescents at risk, not only of school failure but of personal and social crises – even death.

Estimates vary for the number of teens who are gay or lesbian, ranging from 5% to 15% according to some experts. A number of teens acknowledge a homosexual orientation without engaging in sexual activity. Others are sexually active, a significant percentage with multiple partners. A recent study by the U.S. Centers for Disease Control (reported in *Education Week*, 15 April 1992) found that 19% of all high school students have had at least four sex partners.

Family crises, personal alienation, and social estrangement are factors that place homosexual students at risk in the school setting and beyond. Suicide and the incidence of HIV infection among gay and lesbian teens are at higher levels than for the general teen population. According to some studies, up to 30% of homosexual or bisexual

teens have attempted suicide; and gay and lesbian teen suicides account for about 30% of all teen suicides. AIDS is now the number-two killer of young men in the United States. According to one study (Brownworth 1992), 51% of HIV transmission in adolescents aged 13 to 21 occurs among homosexual and bisexual males.

If educators are aware of problems associated with emerging sexual orientation and the ramifications for potential high-risk student behaviors, they will be able to deal more effectively with those problems and thus diminish the risks to gay teens. The purpose of this fastback is to provide an overview of the major issues associated with teen homosexuality and the at-risk characteristics exhibited by gay teens, and then to suggest practical educational responses that school leaders can implement.

A word about terminology: In this fastback the terms *gay* and *homosexuality* are used interchangeably. In some instances the terms *gay* and *lesbian* are used to distinguish male and female homosexuality. The term *straight* means the opposite of gay, that is, heterosexual.

Understanding Teen Homosexuality

Counselors who don't presume all the world straight can see that five to fifteen percent of the population – including adolescents – is gay.
– Gloria J. Krysiak, *The School Counselor*, March 1987

A significant minority of teenagers spend their adolescence uncertain about their sexual orientation (Flax 1992). In an extensive study involving nearly 35,000 junior and senior high school students in Minnesota, University of Minnesota researchers found that nearly 11% of the respondents were unsure about their sexual orientation. The uncertainty declined with age, from about 26% of 12-year-olds to 5% of 18-year-olds. In this same study, about 1% said they were bisexual or predominantly homosexual. Older students were less likely than younger students to identify themselves as bisexual.

Older teens were more likely than younger teens to report that they were homosexual or to report same-sex attraction and behaviors. Nearly 3% of the 18-year-old males identified themselves as homosexual, and more than 6% reported being attracted to other males. However, only 27% of those who reported being attracted to other members of the same sex identified themselves as homosexual. These statistics are consistent with earlier studies by noted sex researcher Alfred Kinsey, who concluded that perhaps 4% of men are exclusively homosexual throughout their lives, while 10% are exclusively homosexual for at least three years.

Females in the Minnesota study were less likely to identify themselves as homosexual (less than 1%), though they were more likely to report being attracted to members of the same sex. This statistic also is consistent with Kinsey's estimate that the rate of female homosexuality is about half that of male homosexuality.

While survey research of this type is informative, the data might be better interpreted as an indication of the degree of sexual orientation confusion rather than as precise statistics on the prevalence of teen homosexuality. The Minnesota researchers conclude that "ultimately, the findings illustrate the complexities and difficulties in assigning sexual-orientation labels to adolescents." One difficulty is that teens' definitions of sexual orientation probably do not match those of adults. Another may be respondents' reluctance to divulge a non-heterosexual orientation, despite guarantees of anonymity.

To put these statistics in perspective, take a typical high school graduating class of 500 students, half male and half female. If the Minnesota sampling is representative, about 25 students are probably unsure of their sexual orientation. Seven males are homosexual by their own definition; 16 report being attracted to other males. If this same senior class is representative of the national sample of students taking the Youth Risk Behavior Survey conducted by the U.S. Centers for Disease Control (reported in *Education Week*, 15 April 1992), then 28.6% of these students (143) have had four or more sex partners, with male students being more than twice as likely as females to report that level of sexual activity.

It seems clear that defining sexual orientation emerges in a highly individualistic manner. For some teens, the knowledge that they are homosexual or heterosexual comes early. Others may struggle with ambiguity about their sexual orientation throughout adolescence and into adulthood. As Krysiak (1987) points out: "Students sorting out their sexual orientation may be looking for a simple label, and that simplicity may be unhealthy to the adolescent who may not yet be really ready to make a commitment to a lifestyle."

The statistics reported above would indicate that a substantial group of students may need some form of supportive intervention, either because of external responses to their sexual uncertainty or because of their own social and sexual behaviors. And how their families and their schools respond to these students' struggles may be the determining factor that puts these teens at risk.

Response of Family and Peers

The continuing debate over nature versus nurture in the development of sexual orientation frequently intrudes into the dialogue about homosexuality, but it is largely a side issue when dealing with gay teens. What matters when an adolescent declares a same-sex orientation is the reaction of parents and peers to that declaration.

Typically, parents, on learning that their child is gay, react with shock, disbelief, sometimes even blaming themselves. In all too many cases, the emotional turmoil created by the disclosure leads parents to reject the child. Case histories of homosexual teens are often stories of throwaways, runaways, suicides, and attempted suicides. In other cases, parents eventually arrive at a level of acceptance and can help the child to deal positively with his or her emerging sexuality.

Disclosure of homosexual orientation by a teen also raises the issue of rejection by the peer group. As Robert Schaecher (1989), health coordinator for the Calhoun School in New York City, points out, "Homosexuality threatens straight adolescents by raising uncertainties they would rather not deal with so openly." In many instances, the gay teen is subjected to harassment from other teens, ranging from name-calling – "fag," "dyke," "queer" – to physical abuse. Violence directed at homosexuals is a major problem that has its roots in the school peer group. Schaecher questions: "Do educators label student putdowns of gays as unacceptable – or do we just keep silent?"

Some form of advocacy for gay teens who are struggling with emerging sexual orientation is important because, as Krysiak (1987) points out, "gay people are the only minorities that do not have a par-

ent as a role model." Nor are they likely to have a supportive group of peers. The struggle that gay teens face is exacerbated by guilt and fear of disclosure to parents and friends. These factors lead many adolescent homosexuals to adopt dysfunctional behaviors that can put them at risk.

Response of Schools

"For most gay and lesbian students, schools are not welcoming places but scenes of hostility and intolerance, say experts in the problems of gay and lesbian youth" (Willis 1991). The school culture reflects the heterosexual majority. The curriculum, with the exception of token mention of homosexuality in a health education class, generally is silent on issues of sexual orientation. Moreover, it is oblivious to the concerns of gay students in family-living courses, where the subject matter may be alienating, or at least irrelevant, to gay students. As Robert Birle, a former teacher and co-chair of the National Education Association's Gay/Lesbian Caucus, comments: "You don't see the curriculum dealing with the diversity of sexual orientation" (Willis 1991).

Schools often refuse to deal with homosexual issues out of a fear of community reaction. Parents frequently protest that if schools teach about homosexuality, then they are encouraging or approving homosexuality. As a result, schools are reluctant to make information available to students about support services, either those that reasonably might be expected from the counseling department or from community agencies outside the school. Also, school administrators often discourage distribution of information from community support groups or even the publication of a gay teen hotline number in the school newspaper. Thus the response to a fear of community protest cuts off potential help for students who are struggling to understand their sexual orientation.

Alienation and Crises

Any number of studies have demonstrated that gay teens are frequently placed at risk by the circumstances in which they find themselves at school. According to James T. Sears (1991), a senior research associate at the South Carolina Educational Policy Center:

> Being sexually different in a society of sexual sameness exacts a heavy psychological toll. Struggling to cope with their sexual identity, gay and bisexual students are more likely than other youth to attempt suicide, to abuse drugs or alcohol, and to experience academic problems. Of course, gay and bisexual students do not always display these symptoms – in fact, they may excel in schoolwork, extracurricular activities, or sports as a means of hiding their sexual feelings from themselves or others. When they hide their feelings, however, their emotional and sexual development languishes.

In a study by researchers from the University of Washington and the University of Minnesota, 41 of 137 gay or bisexual men interviewed said they had attempted suicide. About half reported multiple attempts (Remafedi et al. 1991). According to the researchers, those who attempted suicide also were more likely to report having been sexually abused, having abused drugs, or having been arrested for misconduct. In a related study by the U.S. Department of Health and Human Services in 1989, gay and lesbian teens were found to be three times as likely to attempt suicide as heterosexual teens. Moreover, gay teens accounted for 30% of all teen suicides. Often, the toll exacted on gay teens is linked to visibility. As Robert W. Deisher at the University of Washington explains: "The majority of kids who are gay as teenagers 'pass' and no one realizes it." The more obvious a student is – that is, the more effeminate appearing or acting – the more likely he will be teased or harassed (*Sheboygan Press*, 31 May 1991).

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At-Risk Behaviors of Gay Teens

Young people have a great deal of difficulty coping with the stigma of homosexuality.

– Gary Remafedi, director, Youth and Aids Project, University of Minnesota

The profile of at-risk behaviors observed in gay teens is not unlike that of any at-risk group of students. What is different is their underlying causes, which may be difficult to address because of the closeted nature of homosexuality. It is the underlying causes, however, that need to be identified and addressed by educators, parents, and other resource persons – and by the youths themselves – if these at-risk behaviors are to be changed.

In this chapter we examine some of the behaviors exhibited by gay teens at risk. This is followed by a discussion of some of the responses that informed educators can make to these behaviors.

School Failure

Three key characteristics that are common in disaffected students in general are also common in gay teens, albeit with a different spin: 1) poor self-image/low self-esteem, 2) alienation from the peer group, and 3) hostility toward authority. Each of these is discussed below.

Poor self-image/low self-esteem. Heterosexual youths find positive role models everywhere who affirm their "normality." Teens strug-

gling with defining their sexual orientation or who have identified themselves as homosexual seldom find positive gay models. Thus they are acculturated through models that tend to deny their sexuality in negative ways. This denial often is internalized as guilt and self-contempt.

Low self-esteem both arises from and leads to feelings of rejection. Even when students have not confided their feelings of sexual confusion to anyone, the rejection of "significant others" is often projected; and that anticipation of rejection can affect personal relationships.

Poor self-image is often evidenced in students who are:

- achieving below expected levels – that is, doing poorly in spite of average or above-average ability;
- failing to see a relationship between effort and achievement;
- displaying immature behavior;
- giving up on difficult tasks instead of persevering;
- not participating in discussions because they feel as though their opinions are not worth sharing or will be rejected.

Alienation from the peer group. The barriers that exist between being heterosexual or homosexual often leave gay teens with no trusted friend in whom to confide. Moreover, students who appear to be different often are treated with suspicion, distrust, and open hostility by their peers. Alienated from peers with whom they normally should identify, teenagers coming to grips with their homosexual orientation often act out that social estrangement in the following ways:

- being tardy for class;
- cutting classes;
- not participating in class activities (not dressing for physical education classes, not giving oral presentations, or not participating in other activities that call attention to themselves);
- not participating in extracurricular activities;
- failing to establish goals for a career future.

Hostility toward authority. Often coupled with alienation is hostility manifested by the rejection of those who have rejected, or may be expected to reject, the gay teen. In school this hostility can be acted out in a variety of ways:

- not relating to authority or being rebellious, resulting in recurring discipline problems;
- expressing negative attitudes;
- running away from home or being truant from school;
- abusing alcohol or drugs;
- fighting or verbally abusing other students;
- being sexually aggressive.

As we shall see, the characteristics of low self-esteem, alienation, and hostility that lead to school failure for many gay teens also put them at risk of personal endangerment.

Depression and Suicide

As Robert J. Bidwell (1988) points out: "growing up gay or lesbian is living daily with a terrible secret that no one must ever know." Only a minority of gay teens "come out," or openly admit their homosexuality. Some are exposed by their behavior. But most live hidden lives, fearing the rejection that is a real possibility if their true sexual orientation is discovered. Many gay teens, when they reveal their homosexuality, are thrown out of their homes by their parents or run away rather than endure the physical and emotional abuse of their parents. For a significant number of gay teens, the ultimate response to the depressive effects of denial and concealment or the pain of being "out" is suicide.

The National Teen Suicide Audit, conducted by the Gallup Organization (reported in *Education Week*, 10 April 1991) found that 6% of American teenagers have attempted suicide and that another 15% "have come close to trying." Nearly half of these teens (47%) cited problems at home as the contributing factor. Other factors they iden-

tified included depression (23%), problems with friends (22%), and low self-esteem (18%).

The figures for gay teens are higher. Findings in earlier studies (Roesler and Deisher 1972; Remafedi 1987) are echoed in those reported recently by researchers in Minnesota and Washington, who found that 30% of homosexual male teenagers had attempted suicide – with about half of those reporting multiple attempts.

The warning signs for gay teen suicide mirror those of suicide generally:

- a depressed mood that lasts longer than two weeks;
- sleeping much more than usual;
- eating much more or much less than usual;
- restlessness, inability to concentrate in class or tolerate inactivity;
- not enjoying activities that used to be important;
- spending much more time alone; lack of interest in friends;
- feelings of hopelessness;
- sudden change in behavior or reactions; for example, a quiet person becoming suddenly boisterous, an outgoing person becoming exceptionally quiet or withdrawn.

Gay Teens and AIDS

Bidwell (1988) notes that "Many of those rights of passage through which other teens pass are not open to the gay and lesbian adolescent." The normal processes of dating – exchanging glances, sending Valentines, telephoning for a date, going to a movie, walking home hand-in-hand – are denied to the homosexual teenager. And without this healthy pathway toward initial sexual exploration, gay teens often resort to what Bidwell terms the "baths, bars, or bushes." Anonymous sexual encounters do little to foster intimacy or raise self-esteem. Instead, they are likely to increase feelings of guilt and estrangement.

Moreover, anonymous sexual encounters in this era of AIDS are fraught with dangers that go well beyond the normal complement of

potential sexually transmitted diseases, such as herpes and gonorrhea. According to a report by Karen Hein, founder and director of the Adolescent AIDS project at the Montefiore Medical Center in the Bronx, "New York accounts for 23% of all reported cases of AIDS among 13- to 21-year-olds in the U.S." (quoted by Brownworth 1992).

Other cities and states present similarly alarming statistics. For example, one in four persons with AIDS in Georgia is an adolescent; and between 30,000 and 40,000 teenagers and young adults in the state are estimated to be HIV-positive. In Los Angeles and Miami, about 20% of reported AIDS cases are among adolescents; in Newark, New Jersey, the figure is 35%.

The highest number of new AIDS cases, according to the Centers for Disease Control, is now among men and women between the ages of 20 and 29. Finding this trend "extremely alarming," former Surgeon General Antonia Novello states, "There is no question that those cases were contracted during adolescence" (quoted in Brownworth 1992).

A study, "AIDS Among Adolescents," reported in the *American Journal of Diseases of Children* (October 1990) provides the following statistics on HIV transmission routes in adolescents aged 13 to 21 in the United States:

Homosexual/bisexual males	51%
Transfusion recipients	22%
Male homosexual intravenous drug users	8%
Heterosexuals	8%
Intravenous drug users	6%
Other	5%

In Karen Hein's words: "We've got to look at some new strategies, not just keep hauling out the old ones like telling kids not to have sex. . . . The point is that wishful thinking, 'Just say no,' and simplistic thinking ought to be part of the past history of the AIDS epidemic. Now we have a growing epidemic on our hands, and we need very, very bold steps to address it" (quoted in Brownworth 1992).

The School's Response to Gay Teens at Risk

As with religious tolerance, the goal is not to support or promote any particular belief system or lifestyle, but to protect the rights of all.
– Robert Birle, co-chair of the NEA Gay/Lesbian Caucus

If educators are to address the rights and needs of *all* students effectively, including those students who are homosexual or who may be struggling to define their sexual orientation, then they first need to examine their own attitudes and the institutional attitudes prevalent in their schools with regard to gay students. Many of these attitudes are not expressed openly. Others are reflected in school policies, practices, and curricula. Once educators recognize that gay teens have specific social, psychological, and educational needs that may be different from their straight peers, then they need to consider the kinds of support services that schools can provide for these students.

Dealing with Attitudes and Policies

The attitudes gay teens observe among their peers, teachers, counselors, and administrators will determine whether the school can address their needs.

When examining a school's attitudes about gay teens, it is helpful to think of a continuum from *exclusive* to *inclusive*. At the exclusive extreme, the school is blatantly homophobic. Gay students are subjected to verbal harassment, name-calling, labeled as AIDS carriers,

or deliberately shunned. In some cases, school authorities look the other way when gay teens are harassed or physically abused.

Midway along the continuum, harassment may not be tolerated; but there is institutional silence on homosexuality. And the curriculum is silent as well. Teachers conduct their lessons on the premise that all students are heterosexual.

As the continuum becomes more inclusive, there is a recognition that some students may be questioning their sexual orientation and that some can be, or are, homosexual. School policies do not tolerate harassment, and the curriculum might give token recognition to a different sexual orientation.

At the fully inclusive end on the attitudinal continuum, teachers do not assume uniform heterosexuality and use language that recognizes sexual diversity. The curriculum reflects this recognition and acknowledges the culture and history of homosexuals as a group in a way that validates students' identity. In an inclusive school, teachers and counselors make it easy for gay students to approach them for advice and support.

Following are five "attitude indicators" that let gay teens know that they can ask for help or talk about their feelings:

1. Teachers and counselors use language that indicates an awareness of sexual diversity; they do not assume that all teens are heterosexual.
2. Teachers speak out against harassment and indicate that humor at the expense of gays is offensive.
3. Teachers recognize and openly discuss the contributions of homosexuals; for example, an English class might read and discuss the works of gay and lesbian writers.
4. Teachers and counselors display books or posters that show they are open to discussing homosexuality.
5. Counselors invite students whom they believe to be wrestling with sexual orientation to discuss their feelings. (Gloria Krysiak shares this gay student's comment: "It has to be easier for you to ask than for me to just come out and tell you.")

Gay teens tend to be a very silent minority. Many have been taught by observation or through personal experience that rejection and pain can be expected from disclosure of their sexual orientation. In order to reach those gay teens who may be at risk, teachers and counselors will need to demonstrate their openness in everyday conversations and in the way they deal with selected curriculum content in their classrooms. Also, support for teachers and counselors who attempt to serve gay teens needs to be provided at the institutional level through policies and practices that include the following:

Development of non-discrimination policies. School employees need to be secure within the institution in order to work effectively with students, teachers, counselors, and administrators. Policies that affect the way school employees are treated get translated into how students are treated. Therefore, non-discrimination policies must begin with employment. Is it acceptable for a staff member to be gay or lesbian? If known homosexuals are routinely discriminated against in hiring, or if employees are fired or otherwise "counseled out" when their homosexual orientation is discovered, then the clear message to gay students is that they can never expect any meaningful support for their needs.

Development of inclusive curricula. Gay and lesbian issues are part of the human condition and need to be included in the curriculum through readings, discussions, or projects when appropriate to a specific course. And the language teachers use and the manner in which topics are addressed let students know whether it is permissible to deal with gay and lesbian issues candidly. Teachers should be free to – and encouraged to – include gay and lesbian issues in their lesson plans, in reading assignments, and in lists of potential topics for written assignments or class presentations. Individuals who are gay or lesbian, or parents of gay children, can be invited as guest speakers when appropriate.

The health curriculum is an area in which sensitivity to language is important. For example, when dealing with various prevention

measures in an AIDS education unit, the phrase "abstinence until marriage" is not a context in which gay teens see themselves. A more appropriate phrase might be "restricting sex to a monogamous relationship," which better matches gay teens' circumstances and avoids imposing a heterosexual social context. Likewise, in "family living" contexts, the use of non-gender-specific language in discussions about relationships allows students for whom male-female pair configuration is an ill fit to enter the discussion.

Professional development. If teachers are to work effectively with at-risk gay teens, they must become informed about gay issues. Such professional development will include reading, interacting with informed professionals in the community, and becoming familiar with local resources, such as gay organizations, health care agencies, counseling services, and youth groups. Many of these local groups can provide films, books, pamphlets, and bibliographies, some of which can be used with students. It is also important that school officials endorse comprehensive professional development because it conveys broad attitudinal support within the institution, as well as creates a cadre of professionals with specific skills and knowledge to assist at-risk gay teens.

Along with on-going professional development, the schools should establish a professional library with resource information on gay and lesbian issues, the development of sexual orientation in adolescence, and other topics related to homosexuality.

Support Services for Gay Teens

When a school's attitudes and policies are responsive to the needs of gay teens, then educators can teach tolerance and acceptance. They can help gay teens understand themselves, as well as correct some of the stereotypes of homosexuality. They can debunk the myths that put gay teens at risk. Positive attitudes and policies within the institution also allow educators to create support services in the school for gay teens and to develop links with outside organizations, which

can provide additional services for the diverse, individual needs of gay teens. Following is a description of some of the support services needed by gay teens.

The library. Accurate and up-to-date information is the foundation for helping students to help themselves. School libraries should abandon curricular silence about homosexuality and provide information that many teenagers need as they struggle to understand their sexual orientation. Libraries can provide basic support services by maintaining books, pamphlets, magazines, and audiovisual materials that discuss gay and lesbian issues. Both nonfiction and fiction works serve to validate that, "being gay or lesbian is a natural variation of human sexual behavior; it may be deviant statistically, but not clinically" (Schaecher 1989).

Library resources serve gay teens directly, but they also can raise the level of awareness about gay and lesbian issues among students and staff generally. As knowledge about homosexuality increases in positive ways, incidents of homophobia and harassment of gay students tend to decrease.

Local gay/lesbian support groups or organizations often can provide bibliographies that librarians can use to familiarize themselves with available print materials, films, videos, and so on. Several of the national organizations listed in the Resources section of this fastback also may be helpful.

The counseling center. If counselors are viewed as knowledgeable about and supportive of gay and lesbian issues, then it is easier for students to approach them with questions about sexual orientation. Most adolescents are reluctant to discuss sexual matters with adults and feel awkward doing so. This reluctance is intensified for the gay student who is worried about the reaction others may have to the disclosure of a homosexual orientation.

In particular, gay students may not be ready to face the reaction of parents and peers on disclosing their sexual orientation. So the first role of the counselor may be to help the student to prepare for the

reaction prior to disclosure to parents, friends, and others whose acceptance may be problematic (Krysiak 1987).

Unfortunately, in some school districts, the policy requires counselors to inform parents when they discuss sexual matters with students. Students usually know whether they can confide in counselors; and so, when policy compromises counselor confidentiality, students in general – and gay students in particular – are reluctant to discuss sensitive issues with their counselors that they are not yet ready to discuss with their parents.

Under these circumstances, two courses of action are possible. First, counselors, teachers, and administrators can work to sensitize the school board to the constraints of existing policy and work to change the policy. Second, counselors and teachers can inform students about alternatives to in-school counseling, such as local youth group services and telephone hotlines.

Counselors are a key support service. They can help gay students understand themselves and develop appropriate coping skills. And they can channel gay students into self-protective strategies that help them eliminate inappropriate or dysfunctional behaviors that place them at risk.

A "Special Place." "I don't think I fit in anywhere. I don't know where the line is that I shouldn't cross. Maybe I'll always be alone." This comment from a student at New York's Harvey Milk School (quoted by Getlin 1990) is typical of many gay teens. In a very few communities across the nation, schools have established "special places" for gay adolescents. One of these is the Harvey Milk School in New York City. This school was established in 1985 by the Hetrick-Martin Institute for Lesbian and Gay Youth in cooperation with the New York City Board of Education. Named for the gay San Francisco supervisor who was assassinated in 1978, the Harvey Milk School, located near Greenwich Village, is the nation's only public school for gay, lesbian, and transsexual adolescents. Students who attend the school find it to be a haven from their regular public school, where

they were frequently harassed or ostracized by teachers as well as other students. Josh Getlin (1990), in a feature article about the school, writes about a 14-year-old lesbian who, prior to entering the Harvey Milk School, said she "felt safer hanging out on street corners than spending time in the schoolyard." The common feature of school-sponsored "special places" is that they are, fundamentally, dropout prevention alternatives.

While most school districts are unprepared philosophically or fiscally to provide an alternative school for gay adolescents, many might develop "special places" within schools, where gay and lesbian students can feel comfortable and learn to deal positively with their sexual orientation. A model for this type of program is Project 10, founded in 1984 by Virginia Uribe in Los Angeles.

Project 10 was organized as an in-school counseling program in response to the unmet needs of gay and lesbian students in the Los Angeles schools. The project is designed, according to its literature, "to keep students in school, off drugs, and sexually responsible." Project staff conduct workshops for administrators and other staff, provide direct student counseling, develop liaison relationships with community social and health organizations, and offer outreach services to parents. The *Project 10 Handbook* (listed in the Resources section) can be used as a guide by schools that want to explore the possibility of developing in-school support services for gay teens.

Project 10 is not without critics, however. As any school that initiates an on-campus program for homosexual youth might anticipate, there are those in the community who see the project as a way of "legitimizing" homosexuality or "recruiting" teens into a homosexual lifestyle. Because of these criticisms, many school officials are more comfortable with referring students to community organizations rather than with establishing in-school programs.

Youth groups. Youth groups for gay teens exist in a number of larger communities. Usually sponsored by social service organizations, health agencies, hospitals, churches, or other institutions, most focus

on some form of counseling or group discussion process dealing with self-esteem, personal values, responsible behavior, and related issues. And many attempt to structure a system of peer support.

A model for gay and lesbian youth groups is Indiana's IYG, headquartered in Indianapolis. (See Resources for the address.) IYG, originally called the Indianapolis Youth Group prior to branching out to additional sites, is a social, support, and educational group for gay, lesbian, and bisexual youth under age 21. The organization has three primary goals: 1) to provide a safe, comfortable place for gay, lesbian, and bisexual youth to meet and socialize with others their own age; 2) to provide a support system for these youth; and 3) to educate them in ways to reduce high-risk behaviors, including behaviors associated with HIV/AIDS infection and with substance abuse.

Self-identified gay teens can participate in a variety of IYG activities:

- bi-weekly educational meetings;
- social events, such as dances and roller-skating parties that provide a safe place for youth to socialize;
- a "toxic family" support group to help youth deal with mental and physical abuse from family and peers;
- retreats to develop self-esteem and leadership skills;
- peer-counseling training so that teens can be part of the support system for other youth;
- IYG Ambassadors, who present workshops and panel discussions on an outreach basis to gay, lesbian, and bisexual youth;
- IYG Interactive Theater, which presents skits to educate others about gay/lesbian/bisexual youth needs and to educate all youth about AIDS;
- a pen-pal network that matches youth under 21 with compatible pen pals from across the United States.

According to IYG Executive Director Christopher Gonzalez, most of the teenagers involved in IYG programs come because of feelings of isolation and rejection. He points out that "Like members of other

minority groups, gay, lesbian, and bisexual youth face discrimination, but generally more often and more severe. . . . Among other minority groups the family acts as a counterforce to the effects of discrimination; however, among gay, lesbian, and bisexual youth the non-accepting family can exacerbate the pressures rather than help to relieve them."

Gonzalez stresses that IYG group facilitators are not counselors, but youth in need can contact IYG for referral to crisis or ongoing counseling. IYG stresses a high level of professionalism in its interactions with adolescents. The organization does not encourage dating or sexual relations between members, and facilitators are not permitted to date youth group members. Personal information shared at IYG meetings is considered confidential.

IYG has received national recognition and is supported with funding from the Centers for Disease Control and the Indiana State Department of Health. During 1990-91, partial funding also was provided by the U.S. Conference of Mayors. The organization operates centers or chapters in nine other Indiana cities besides the headquarters in Indianapolis. The executive director has provided technical assistance to cities in several other states where there is interest in establishing similar gay/lesbian/bisexual support groups.

Hotlines. According to Gonzalez, contact with IYG usually begins with a call to the Gay/Lesbian/Bisexual Youth Hotline, which operates Thursdays through Sundays from 7:00 p.m. until midnight EST. (See Resources for this and other hotline numbers.) The IYG hotline is the only national, toll-free hotline for gay teens that is peer facilitated. When a teenager calls, he or she talks to another teen who has participated in a 50-hour peer-facilitator training program.

Hotlines provide gay teens with a "risk-free" or anonymous way to get information that can, literally, save their lives. The Teens Teaching About AIDS hotline is also peer-facilitated and can help any teenager learn more about HIV infection and prevention. Other hotlines respond to questions about AIDS for all ages (in English and in Spanish), runaways, and sexually transmitted diseases.

School leaders need to identify local hotlines that also may meet the needs of at-risk students. Gay teens, or any students for that matter, benefit when the school makes them aware of available resources. Many hotlines, like IYG's Gay/Lesbian/Bisexual Youth Hotline, can refer callers to direct assistance, such as youth groups, counselors, or health professionals who can help teenagers deal positively with questions and problems related to sexual orientation and other matters.

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Conclusion

Fear of controversy, cultural taboos, and to some degree, an irrational fear of homosexuality have prevented many educators from dealing effectively with gay and lesbian young people. Fear leads to discrimination, and this discrimination has caused immeasurable losses to our nation's teenagers.

The climate in most schools is such that gay teens rarely are willing to expose themselves to the ridicule, harassment, and abuse that comes when they openly acknowledge their sexual orientation. Instead, they hide their sexuality in order to pass for "normal." Such concealment takes a terrible psychological and emotional toll. The result can be behavioral choices that place adolescents at risk of school failure, disease, and even death.

To counteract these conditions, educators will need to acknowledge that homosexuality is a variation in sexual orientation and that they have a professional responsibility to provide information, counseling, and other services to help gay teens understand their sexual orientation and to avoid high-risk behaviors. They will need to regard homophobic prejudice in the same light as other prejudices, such as racism or anti-Semitism. And they will need to take deliberate steps to eliminate the negative attitudes and actions of students and staff in their schools that place gay teens at risk.

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Resources

Publications

American Association of School Administrators. *Building Self-Esteem: A Guide for Parents, Schools, and Communities*. Arlington, Va., 1991.

Berkan, William A., et al. *Guide to Curriculum Planning in Suicide Prevention*. Madison: Wisconsin Department of Public Instruction, 1990.

Berkan, William A., et al. *Suicide Prevention: Resource and Planning Guide*. Madison: Wisconsin Department of Public Instruction, 1986.

Center for Population Options. *Guide to Implementing TAP: Teens for AIDS Prevention Project*. Washington, D.C., 1990. Center for Population Options, 1025 Vermont Avenue, N.W., Suite 210, Washington, DC 20005.

Dougherty, John W. *Effective Programs for At-Risk Adolescents*. Fastback 308. Bloomington, Ind.: Phi Delta Kappa Educational Foundation, 1990.

Friends of Project 10. *Project 10 Handbook: Addressing Lesbian and Gay Issues in Our Schools*. Los Angeles, 1989. Friends of Project 10, Inc., 7850 Melrose Avenue, Los Angeles, CA 90046.

Pfeifer, Jerilyn K. *Teenage Suicide: What Can the Schools Do?* Fastback 234. Bloomington, Ind.: Phi Delta Kappa Educational Foundation, 1986.

Yarber, William L. "Performance Standards for the Evaluation and Development of School HIV/AIDS Education Curricula for Adolescents." *SIECUS Report* (August/September 1989): 18-25.

Yarber, William L. *AIDS Education: Curriculum and Health Policy*. Fastback 265. Bloomington, Ind.: Phi Delta Kappa Educational Foundation, 1987.

Organizations

AIDS Action Council
2033 M Street, N.W.
Washington, DC 20036
(202) 293-2886

American Red Cross
National Headquarters
431 18th Street, N.W.
Washington, DC 20006
(202) 737-8300

Center for Population Options
1025 Vermont Avenue, N.W., Suite 210
Washington, DC 20005
(202) 347-5700

Federation of Parents and Friends of Lesbian and Gay Youth
P. O. Box 27605
Central Station
Washington, DC 20038

Friends of Project 10, Inc.
Virginia Uribe, Ph.D.
7850 Melrose Avenue
Los Angeles, CA 90046
(213) 651-5200

The Hetrick-Martin Institute, Inc. for Lesbian and Gay Youth
401 West Street
New York, NY 10014
(212) 633-8920

IYG
P. O. Box 20716
Indianapolis, IN 46220

Lesbian and Gay Public Awareness Project
P. O. Box 65603
Los Angeles, CA 90065
(213) 281-1946

National Gay and Lesbian Caucus of the American Federation of Teachers
P. O. Box 19856
Cincinnati, OH 45219

Parents and Friends of Lesbians and Gays, Inc.
P. O. Box 24565
Los Angeles, CA 90024
(213) 472-8952

Sex Information and Education Council of the United States (SIECUS)
32 Washington Place, 5th Floor
New York, NY 10003
(212) 673-3850

U.S. Centers for Disease Control
1600 Clifton Road, N.E.
Atlanta, GA 30333

Telephone Hotlines

AIDS National Hotline
1-800-342-AIDS (1-800-342-2437)
Daily 24-hour service

Deaf Community AIDS Hotline (TTY/TDD)
1-800-AIDS-TTY (1-800-243-7889)
Monday through Friday, 10:00 a.m. to 10:00 p.m. EST

IYG Gay/Lesbian/Bisexual Youth Hotline
1-800-347-TEEN (1-800-347-8336)
Thursday through Sunday, 7:00 to 11:45 p.m. EST
(Peer counseling and information for youth under 21, to help reduce the feelings of isolation and rejection and to increase self-esteem, which reduces high-risk behavior and the spread of HIV/AIDS. Accessible to the hearing impaired.)

Linea Nacional de SIDA (Spanish AIDS Hotline)
1-800-344-SIDA (1-800-344-7432)
Daily, 8:00 a.m. to 2 a.m. EST

National Runaway Hotline
1-800-231-6946
Daily 24-hour service

National Sexually Transmitted Diseases Hotline
1-800-227-8922
Monday through Friday, 8:00 a.m. to 11:00 p.m. EST

Teens Teaching About AIDS
1-800-234-TEEN (1-800-234-8336)
Monday through Friday, 4:00 to 8:00 p.m. EST
(AIDS information hotline staffed by teens, primarily for heterosexual teens.)

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References

Bidwell, Robert J. "The Gay and Lesbian Teen: A Case of Denied Adolescence." *Journal of Pediatric Health Care* 2 (1988): 3-8. (Reprinted in Project 10 Handbook.)

Brownworth, Victoria A. "America's Worst-Kept Secret." *The Advocate* (March 1992): 38-46.

Flax, Ellen. "Significant Numbers of Teenagers Unsure of Sexual Orientation, New Study Finds." *Education Week*, 15 April 1992, p. 4.

Getlin, Josh. "School Is a Special Place for Gay Students." *Milwaukee Journal*, 29 April 1990, p. G10.

Krysiak, Gloria J. "Needs of Gay Students for Acceptance and Support." *The School Counselor* 34 (March 1987): 304-307.

Lawton, Milton. "More Than a Third of Teens Surveyed Say They Have Contemplated Suicide." *Education Week*, 10 April 1991, p. 5.

"Nineteen Percent of High School Students Have Had at Least Four Sex Partners, Study Finds." *Education Week*, 15 April 1992, p. 4.

Remafedi, G.J. "Homosexual Youth: A Challenge to Contemporary Society." *Journal of the American Medical Association* 258 (1987): 222-25.

Remafedi, G.J., et al. "Risk Factors for Attempted Suicide in Gay and Bisexual Youth." *Pediatrics* 87, no. 6 (June 1991): 869-75.

Roesler, T., and Deisher, R.W. "Youthful Male Homosexuality." *Journal of the American Medical Association* 219 (1972): 1018-23.

Schaecher, Robert. "Reducing Homophobia Among Educators and Students." *Independent School* 48 (Winter 1989): 29-35.

Sears, James T. "Helping Students Understand and Accept Sexual Diversity." *Educational Leadership* (September 1991): 54-56.

"Study: Thirty Percent of Gay, Bisexual Male Teens Tried Suicide." *Sheboygan Press*, 31 May 1991, p. 3.

Willis, Scott. "Teaching Gay Students." *ASCD Update* 33, no. 3 (March 1991).

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